

2020 IHCP Works Seminar

Session Descriptions and Schedule

Session Descriptions

The following tables present the 2020 IHCP Works Seminar sessions and descriptions.

DXC IHCP Works Session Descriptions

Title	Short Description	Long Description
Fee-For-Service Behavioral Health 101	Introduction to behavioral health services	This session provides an introduction to the inpatient and outpatient behavioral health services covered under the fee-for-service Medicaid benefit.
Fee-For-Service Behavioral Health 201	Overview of specific behavioral health services	This session provides more billing details on specific behavioral health services, including applied behavioral analysis (ABA), crisis intervention, and Medicaid Rehabilitation Option (MRO).
Fee-For-Service Prior Authorization 101	Prior authorization for FFS members	This session provides an overview of the fee-for-service prior authorization (PA) process, including how to request and review PA for Traditional Medicaid members.
Life of a Claim	Understand how a claim is adjudicated	This session provides an overview of the life of a claim at DXC. Have you wondered how your claims are processed? This session breaks down the steps that apply to all claims submitted to DXC. Learn how prior authorization (PA), system edits and audits, pricing, and medical policy suspensions affect claim processing. Presenters will also discuss ways you can correct your claims through the online adjustment process. This session is ideal for those who are new to Medicaid.
Portal "How To" 101	Understand how to use the Provider Healthcare Portal	This session provides a broad overview of the various functions available through the Provider Healthcare Portal, including provider enrollment, member eligibility, prior authorization submission, and claim submission.
Fee-For-Service Portal Submission <i>CMS-1500</i> Professional Primary and Secondary Claims 201	Understand how to submit a professional claim (<i>CMS-1500</i>) the right way	This session provides a comprehensive look at the claim submission process for professional claims (<i>CMS-1500</i>). This session will also provide key tips and answers to common questions about why claims may have denied.
Provider Enrollment Easy and Efficient on the IHCP Provider Healthcare Portal 101	Understanding the IHCP provider enrollment process	This session will answer all of your questions about the provider enrollment process, including steps to take when converting from an ordering, prescribing, and referring (OPR) provider to a rendering provider or completing a change in ownership (CHOW).
Unlocking the Secret of <i>UB-04</i> Secondary Claims 201	Learn how to navigate institutional (<i>UB-04</i>) secondary claims	This session provides a comprehensive look at the claim submission process for institutional (<i>UB-04</i>) claims. This session will be specifically focused on third-party liability and Medicare secondary claims.

FSSA IHCP Works Session Descriptions

Title	Short Description	Long Description
MQ (Medicaid Questions): A Medicaid Quiz Show	Participate in an interactive quiz show while learning about Medicaid	This game show will provide a series of generic questions about the IHCP, including provider enrollment, prior authorization, and claim processing. Come have fun answering questions and learning more about specific processes! Note: This session will be held on the Adobe Connect platform.

Title	Short Description	Long Description
Engaging with the Member Experience	Simulate the experience of a pregnant patient on Medicaid	This unique experience will break participants into small groups to simulate the experience of a pregnant patient in the Medicaid program. Discussion will uncover how a member enrolls in the program and receives services both before and after the baby is born. While this session simulates the experience of a pregnant member, the discussion will draw conclusions applicable to all IHCP provider types. Note: This session will be held on the WebEx platform. Space is limited in this session and preregistration is required.
IHCP Listens – Credentialing Workshop	Hear the latest from OMPP on credentialing	This presentation will be an opportunity for the Office of Medicaid Policy and Planning (OMPP) to share current trends around credentialing activities as well as solicit feedback from providers on credentialing improvements.
Naloxone Project	Understand EMS reimbursement for naloxone	This presentation provides an overview of the new reimbursement process for emergency medical service (EMS) providers that provide naloxone.
Electronic Visit Verification (EVV) 101	Understand the policy requirements for EVV	This presentation is geared toward personal care services providers that are impacted by electronic visit verification. This session will provide high-level details on the necessary steps providers need to take to be ready for final implementation.
Keynote 1	Hear from DMHA leadership	This recorded presentation will be a discussion from Jay Chaudhary (Division of Mental Health and Addiction director). He will discuss the impact of telemedicine and mental health services during the coronavirus disease 2019 (COVID-19) public health emergency.
Keynote 2	Hear from ISDH leadership	This recorded presentation will be a discussion from Dr. Lindsay Weaver (Indiana State Department of Health chief medical officer). She will discuss her experience with the State's overall response to the COVID-19 public health emergency.
Medicaid Director	Get the latest policy from the Medicaid director	This recorded presentation will be provided by Allison Taylor (Indiana Medicaid director). She will provide an update on the Office of Medicaid Policy and Planning's strategic vision and direction for the Medicaid program.

Anthem IHCP Works Session Descriptions

Title	Short Description	Long Description
Anthem Claim Requirements 101	Introduction to claim requirements and Anthem's claim processing and payment systems	Health partners will receive claim processing updates and reminders and learn about eligibility requirements, the managed care model of healthcare delivery, prior authorization requirements, and the claim filing process.
Anthem Provider Eligibility and Credentialing 101	An in-depth look into provider credentialing with Anthem	This session addresses all corners of the eligibility and credentialing process for Anthem. It will cover information about the credentialing scope, credentials committee, initial credentialing and recredentialing, Health Delivery Organization (HDO) credentialing, sanction monitoring, the appeals process, and Anthem's credentialing program standards.
Anthem Utilization Management 101	An introduction to Anthem's prior authorization process	This session will outline Anthem's prior authorization process. It will cover inpatient utilization management and outpatient precertification (OPC) processes.
Anthem Website Navigation 101	A tour through Anthem's Provider Portal	Providers will review how to access Anthem's most recent news and announcements, manuals, directories, PA, eligibility and more. Attendees will see a live demonstration of Portal navigation.
Anthem Behavioral Health Interactive Care Reviewer (ICR) 201 Jeopardy	A lesson in Anthem's ICR process followed by a game of Jeopardy	Health partners will learn about the benefits, products, and services available through the Interactive Care Reviewer (ICR), learn how to access them, and then participate in a game of Jeopardy to test their knowledge.

Title	Short Description	Long Description
Provider Rep Live: Marvin Davis Live	An interview with Provider Rep Marvin Davis	This interview conducted by Marvin Davis will highlight an issue that was successfully resolved using Anthem's dispute process.
Anthem Screening, Brief Intervention and Referral to Treatment (SBIRT) Squares	A lesson in Anthem's SBIRT program followed by a game of Hollywood Squares	Health partners will learn about the benefits of Screening, Brief Intervention, and Referral to Treatment (SBIRT) and then challenge each other in Hollywood Squares to test their knowledge.
The Anthem Bunch	...that's the way we became the Anthem Bunch!	Meet your Provider Representative team through this fun Brady Bunch-inspired introduction.
Availity: A Guided Chat	Take a tour of the functions of Availity with Anthem's experts	Health partners will learn about Availity and how it can be used to locate resources, submit forms, and look up prior authorization.

CareSource IHCP Works Session Descriptions

Title	Short Description	Long Description
CareSource Claims 101	Introduction to claim requirements and CareSource's claim processing and payment systems	Health partners billing for Hoosier Healthwise and Healthy Indiana Plan members will learn about claim filing requirements, submission process, and instructions on filing disputes and appeals, and how to avoid the most common denial reasons.
CareSource Prior Authorization 101	An introduction to requesting and requirements for prior authorizations	This session addresses all the ins and outs of prior authorizations. Topics will include determining which services require prior authorization and how to request prior authorization specifically on the provider portal. Additional topics will include rules for specific types of services, retro authorizations, and the appeals process.
CareSource Dental 101	An introduction to CareSource's Dental Benefit Manager and provides guidance for dental providers	This session will outline the relationship between CareSource and SkyGen. Dental providers will learn about claim submission, disputes, and prior authorizations.
Cost of Poverty Experience (COPE) 201	Understand the unique challenges facing Hoosiers living in poverty	The COPE session will place providers in the position of a Hoosier living in poverty and to experience the unique challenges facing those living in poverty. The session will deepen providers' understanding of the social factors that impact healthcare delivery and outcomes and foster community discussions which can lead to change and new ways of thinking. Note: This session requires attendees to download an additional application on their desktop. Space is limited in this session and preregistration is required.
Versant Superior Vision	An introduction to CareSource's new Vision Benefit Manager	Vision providers will be introduced to CareSource's new Vision Benefit Manager: Versant Superior Vision. Providers will learn about Medicaid vision benefits, claim filing, and tools available to vision providers.
CareSource Provider Portal 101	A tour through CareSource's Provider Portal	This session provides a tour through CareSource's Provider Portal including registration, resource library, claims, and member reports.
CareSource Returning Citizens Re-Entry 201	An explanation of the services and outcomes of CareSource's Indiana Re-Entry Program	CareSource's Re-entry program is one of the first of its kind in the country and is a pilot program with the Indiana Department of Corrections. The Re-entry program's goal is to improve outcomes and reduce recidivism.
CareSource ECHO Payments Simplified	Learn information about CareSource's new payment system	This presentation will introduce CareSource's new payment system, how the payment system interacts with the provider portal, troubleshooting, and the virtual credit card program.

Title	Short Description	Long Description
CareSource Behavioral Health 101	Hear about updates to CareSource's behavioral health coverages	Behavioral health providers will learn about CareSource's updates regarding substance use disorder (SUD), therapy, intensive outpatient program/intensive outpatient treatment (IOP/IOT), COVID-19, and claims and provider portal elements specific to behavioral health services.
CareSource Eligibility 101	Covers the process of provider credentialing with CareSource	This presentation outlines the credentialing process and accessing and registering for the provider portal. Providers that are not yet credentialed with CareSource would be the ideal attendee for this presentation.

MDwise IHCP Works Session Descriptions

Session Name	Short Description	Long Description
MDwise – Claims 101	Covers PA, claim submission, billing, adjustments and denials vs. rejections	This presentation covers prior authorization (PA), claim submissions, claim billing requirements and adjustments, denials vs. rejections, and helpful resources.
MDwise – Enrollment-Credentialing 101	Covers MDwise enrollment and credentialing requirements	This presentation covers the MDwise provider requirements for enrollment and credentialing. It also includes information on enrollment forms, provider updates, how to disenroll, and contact information.
MDwise – Provider Portal 101	Discusses provider page, portal features, member profiles, and reporting	This presentation discusses the provider page, accessing the portal, and features of the portal (including claim status, member health profiles, and quality reports).
MDwise – Prior Authorization 101	Covers process of PA submissions, PA timelines and appeals	This presentation covers the process of submitting PA requests, PA timelines and appeals, and contact and resource information.
MDwise – How to Avoid Those Pesky Denials	Demonstration on avoiding claim denials	In this session, MDwise will demonstrate how providers can avoid claim denials.
MDwise – Introduction to MDwise Outreach	Video introduction to the provider outreach team	This video session goes beyond just “meet your rep”. MDwise is introducing a provider outreach team. The video will detail department enhancements.
MDwise – Ask MDwise	Hear answers to MDwise's top questions from a recent provider survey	In this livestream webinar, MDwise will answer claim/nonclaim questions from its provider survey. A live Q&A session will follow the webinar.

MHS IHCP Works Session Descriptions

Session Name	Short Description	Description
Claims UB-04 and CMS-1500	An in-depth look at the claim process for using both the <i>UB-04</i> and <i>CMS-1500</i> forms	This presentation covers how to submit different types of claims, issue resolution, and prior authorizations. It also covers how to use the MHS online portal to submit <i>CMS-1500</i> and <i>UB-04</i> claims, request claim reconsiderations, and use different tools to monitor your claims.
MHS Web Portal Overview	Review of the MHS portal and its features	This presentation will highlight the different tools the MHS portal offers; member account management, member eligibility, analytic reports, durable medical equipment (DME) requests, claim submissions, and secure messaging.

Session Name	Short Description	Description
MHS Prior Authorizations	A broad overview of the PA process from requests to appeals	This presentation covers the prior authorization basics from how to request a PA to when PAs are necessary to using the MHS portal to monitor PAs to appealing PA denials.
MHS Pay for Performance (P4P)	An introduction to the P4P program	In this presentation, you will learn about the Pay for Performance program, its measures and targets, and the Partnership for Quality program.
MHS Provider Enrollment and Credentialing	An in-depth review of the provider enrollment and credentialing process	This presentation covers provider enrollment, credentialing, and contract management.
MHS Behavioral Health Panel 201	Hear about specific behavioral health services from MHS experts	MHS experts will discuss the top provider questions related to behavioral health.
MHS Case Management Panel Discussion	Hear about case management from the MHS team	MHS experts will discuss the top provider questions related to case management.
MHS Home Health and SNF Panel	Hear about home health and SNF through a panel discussion	MHS experts will discuss the top provider questions related to home health and skilled nursing facilities (SNFs).

Session Schedules

The following color code key corresponds to tables in the session schedule for the entity presenting.

Color Code Key

FSSA	DXC	Anthem	CareSource	MHS	MDwise
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Session Schedule for Tuesday, October 13, 2020 (CMS-1500/Professional Emphasis)

	Tuesday, October 13		
	Zoom Room 1	Zoom Room 2	Zoom Room 3
8:30 a.m.	Life of a Claim Q&A (8:30 a.m. - 9:25 a.m.)	Utilization Management 101 Q&A (8:30 a.m. - 9:25 a.m.)	
8:45 a.m.			
9:00 a.m.			
9:15 a.m.			
	Break	Break	
9:30 a.m.	Pay for Performance Q&A (9:30 a.m. - 10:25 a.m.)	Eligibility 101 Q&A (9:30 a.m. - 10:25 a.m.)	Intro to MDwise Outreach (9:30 a.m. - 10:25 a.m.)
9:45 a.m.			
10:00 a.m.			
10:15 a.m.			
	Break	Break	Break
10:30 a.m.	Website Navigation 101 Q&A (10:30 a.m. - 11:25 a.m.)	Portal "How To" 101 Q&A (10:30 a.m. - 11:25 a.m.)	Medicaid Director (10:30 a.m. - 11:25 a.m.)
10:45 a.m.			
11:00 a.m.			
11:15 a.m.			
	Break	Break	Break
11:30 a.m.	Claims UB-04 and CMS-1500 Q&A (11:30 a.m. - 12:25 p.m.)	Ask MDwise! Q&A (11:30 a.m. - 12:25 p.m.)	ECHO Payments Simplified Q&A (11:30 a.m. - 12:25 p.m.)
11:45 a.m.			
Noon			
12:15 p.m.			
12:30 p.m.	LUNCH	LUNCH	LUNCH
12:45 p.m.			
1:00 p.m.			
1:15 p.m.			
1:30 p.m.	Prior Authorizations Q&A (1:30 p.m. - 2:25 p.m.)	Claims 101 Q&A (1:30 p.m. - 2:25 p.m.)	KEYNOTE 1 (1:30 p.m. - 2:25 p.m.)
1:45 p.m.			
2:00 p.m.			
2:15 p.m.			
	Break	Break	Break
2:30 p.m.	Dental 101 Q&A (2:30 p.m. - 3:25 p.m.)	Provider Rep Live (2:30 p.m. - 3 p.m.)	Naloxone Q&A (2:30 p.m. - 3:25 p.m.)
2:45 p.m.			
3:00 p.m.			
3:15 p.m.			
3:30 p.m.			
3:45 p.m.			
4:00 p.m.			

Session Schedule for Wednesday, October 14, 2020 (Specialty Provider Emphasis)

	Wednesday, October 14		
	Zoom Room 1	Zoom Room 2	Zoom Room 3
8:30 a.m.	PA 101 Q&A (8:30 a.m. - 9:25 a.m.)	Provider Portal 101 Q&A (8:30 a.m. - 9:25 a.m.)	Behavioral Health 201 Panel Q&A (8:30 a.m. - 9:25 a.m.)
8:45 a.m.			
9:00 a.m.			
9:15 a.m.			
	Break	Break	Break
9:30 a.m.	Behavioral Health 101 Q&A (9:30 a.m. - 10:25 a.m.)	Claim Requirements 101 Q&A (9:30 a.m. - 10:25 a.m.)	Engaging with the Member Experience (9:30 a.m. - 11 a.m.) <i>Note: This is a WebEx session (not Zoom Room 3).</i>
9:45 a.m.			
10:00 a.m.			
10:15 a.m.			
	Break	Break	
10:30 a.m.	Provider Enrollment and Credentialing Q&A (10:30 a.m. - 11:25 a.m.)	Behavioral Health 101 Q&A (10:30 a.m. - 11:25 a.m.)	Break
10:45 a.m.			
11:00 a.m.			
11:15 a.m.			
	Break	Break	
11:30 a.m.	Medicaid Questions (11:30 a.m. - 12:25 p.m.) <i>Note: This is an Adobe Connect session (not Zoom Room 1).</i>	PA 101 Q&A (11:30 a.m. - 12:25 p.m.)	Screening, Brief Intervention and Referral to Treatment (SBIRT) Squares (11:30 a.m. - 12:25 p.m.)
11:45 a.m.			
Noon			
12:15 p.m.			
12:30 p.m.	LUNCH	LUNCH	LUNCH
12:45 p.m.			
1:00 p.m.			
1:15 p.m.			
1:30 p.m.	Provider Portal 101 Q&A (1:30 p.m. - 2:25 p.m.)	Provider Eligibility and Credentialing 101 Q&A (1:30 p.m. - 2:25 p.m.)	KEYNOTE 2 (1:30 p.m. - 2:15 p.m.)
1:45 p.m.			
2:00 p.m.			Break
2:15 p.m.			
	Break	Break	
2:30 p.m.	How to Avoid Pesky Claim Denials (2:30 p.m. - 3:25 p.m.)	Claims 101 Q&A (2:30 p.m. - 3:25 p.m.)	Behavioral Health 201 (2:30 p.m. - 3:25 p.m.)
2:45 p.m.			
3:00 p.m.			
3:15 p.m.			
			Break
3:30 p.m.			Behavioral Health Interactive Care Reviewer (ICR) 201 Jeopardy (3:30 p.m. – 4:30 p.m.)
3:45 p.m.			
4:00 p.m.			
4:15 p.m.			
4:30 p.m.			

Session Schedule for Thursday, October 15, 2020
(UB-04/Institutional Emphasis)

	Thursday, October 15		
	Zoom Room 1	Zoom Room 2	Zoom Room 3
8:30 a.m.	EVV 101 Q&A (8:30 a.m. - 9:25 a.m.)	CMS-1500 201 (8:30 a.m. - 9:25 a.m.)	Returning Citizens Re-Entry Program 201 Q&A (8:30 a.m. - 9:25 a.m.)
8:45 a.m.			
9:00 a.m.			
9:15 a.m.			
	Break	Break	Break
9:30 a.m.	Web Portal Overview Q&A (9:30 a.m. - 10:25 a.m.)		
9:45 a.m.			
10:00 a.m.			
10:15 a.m.			
	Break	The Anthem Bunch (10:30 a.m. - 11 a.m.)	Versant Superior Vision (10:30 a.m. - 11 a.m.)
10:30 a.m.	Enrollment 101 Q&A (10:30 a.m. - 11:25 a.m.)		
10:45 a.m.			
11:00 a.m.			
11:15 a.m.			
	Break	Break	Break
11:30 a.m.	PA 101 Q&A (11:30 a.m. - 12:25 p.m.)		
11:45 a.m.			
Noon			
12:15 p.m.			
12:30 p.m.	LUNCH	LUNCH	LUNCH
12:45 p.m.			
1:00 p.m.			
1:15 p.m.			
1:30 p.m.	Enrollment Credentialing 101 Q&A (1:30 p.m. - 2:25 p.m.)	UB-04 201 Q&A (1:30 p.m. - 2:30 p.m.)	Home Health and SNF Panel Q&A (1:30 p.m. - 2:25 p.m.)
1:45 p.m.			
2:00 p.m.			
2:15 p.m.			
2:30 p.m.	Break		Break
2:45 p.m.	Cost of Poverty Experience (COPE) 201 (2:45 p.m. - 3:45 p.m.)		IHCP Listens – Credentialing Workshop (2:30 p.m. - 3:30 p.m.)
3:00 p.m.			
3:15 p.m.			
3:30 p.m.			
3:45 p.m.			
4:00 p.m.			